REQUEST **FOR** ONTINUED EXAMINATION (RCE) **TRANSMITTAL**

Subsection (b) of 35 U.S.C. §132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA).

Application Number	09/147,367
Filing Date*	Dec. 9, 1998
First Named Inventor	Ulf Schroder
Group Art Unit	1615
Examiner Name	G. S. Kishore
Attorney Docket No.	SCHR3004/REF

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. NOTE: * Filing date must be on or after June 8, 1995; but if before May 29, 2000, then consider a CPA.

1.	Please consider the following as the required submission under 37 C.F.R. §1.114:											
	୕ଷ	a. The A	Amend	dment filed herewith								
		b. The I	nforma	tion	tion Disclosure Statement (IDS) filed on (date):							
:		c. The a	rgume	nts i	nts in the Brief/Reply Brief filed on (date):							
		d. The_	pag	e(s)	e(s) of Form PTO-1449 and copy of each listed document filed (date):							
		e. Other	:									
×	2.	A <u>TWO</u> month Petition for Extension of Time is filed herewith.										
⊠	3.	 The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17 to Deposit Account No. 02-0200. 										
⊠	4.	A check in the amount of \$ 620.00 is submitted herewith.										
_	5.	5. This Request is transmitted by facsimile to number (703)										
0	□ 6. Other:											
THE RCE FEE IS CALCULATED AS FOLLOWS:							٠	Basic Fee:	\$790.00			
Total Claims: 10			-	54	(highest number previously pa	t number previously paid for) = 0.00		X \$50 =				
Independent Claims: 1			-	3	(highest number previously page 2)	aid for) =	0.00	X \$200 =				
Correspondence Address: Multiple Dependent Claim (add \$290.00):												
	nespe	ondence Addre	ess:				Multiple D	ependent C	Claim (add \$290.00):			
	irespe	ondence Addre			2336	·	Multiple D	ependent C	Claim (add \$290.00): Subtotal:	790.00		
	пезр	ondence Addre				4 Jumber		·		790.00 395.00		
Ph		: 703-683-	Cı	usto		·		·	Subtotal:			
Ph			Cı	usto		Number	50% F	·	Subtotal: Small Entity Status: Total:	395.00		
Ph	one	: 703-683-	C1 -0500	usto	mer N	Fax: 703-683-1080	50% F	eduction if	Subtotal: Small Entity Status: Total:	395.00 \$395.00		

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